

STATE OF ARIZONA
DEPARTMENT OF WATER RESOURCES
WATER MANAGEMENT DIVISION
MAIL TO: P.O. BOX 33589, PHOENIX, ARIZONA 85067-3589
3550 North Central Avenue, Phoenix, Arizona 85012
Phone (602) 771-8500 • Fax (602) 771-8690

**APPLICATION FOR A PERMIT TO DRILL OR OPERATE A NON-EXEMPT
WELL WITHIN AN ACTIVE MANAGEMENT AREA PURSUANT TO A.R.S. § 45-599**

I. INSTRUCTIONS:

1. This application should be used to obtain a permit to:
 - (a) Drill a non-exempt well in conjunction with a new or existing General Industrial Use Permit Application, a Certificate of Grandfathered Right, a Service Area Right, or an Irrigation District Right.
 - (b) Convert an existing well to a non-exempt well, or increase the annual permitted volume to be withdrawn from the well.
2. Complete all appropriate items on this application, sign in the appropriate place and mail to P.O. Box 33589, Phoenix, Arizona 85067-3589 or hand deliver to 3550 North Central Avenue, Phoenix, Arizona 85012
3. Pursuant to A.R.S. § 45-599 and A.A.C. R12-15-104, the fee for this application is \$150.00 and the permit fee is \$30.00.

II. GENERAL DATA:

1. Applicant _____
Mailing Address _____

City _____ State _____ Zip Code _____
Contact Person _____
Telephone Number _____

2. Name of Land Owner _____
Mailing Address _____

City _____ State _____ Zip _____ Telephone Number _____

3. Applicant is: ☐ Owner ☐ Lessee

4. Proposed well is: ☐ New well ☐ Increase in Permitted Maximum Annual Volume for Existing Well ☐ Replacement well in a new location.

5. Claim of entitlement to withdraw groundwater is based upon:

- ☐ Certificate of Grandfathered Right No: _____
☐ General Industrial Use Permit No. 59- _____
☐ Service Area Right No: _____
☐ Irrigation District Right No: _____

6. The principal use(s) of groundwater will be (**be specific**) _____

7. Well location: _____¹/₄ _____¹/₄ _____¹/₄ Section _____ Township _____ N/S Range _____ E/W
10 Acre 40 Acre 160 Acre

8. Position location of the well: Latitude _____ ° _____ ' _____ " N Longitude _____ ° _____ ' _____ " W

9. Design Pump Capacity _____ gpm Depth _____ feet
Diameter _____ inches Type of casing _____

10. Proposed annual volume of water _____ acre feet

11. Well is located in the _____ subbasin of the _____ Active Management Area.

FOR DEPARTMENT USE ONLY	
Application No.	_____
Registration No.	_____
File No.	_____
Date Received	_____
AMA	_____
W/S	_____ S/B _____

2B. Parcel No. _____

2C. Public Water System ID # _____

12. Approximate date construction will begin: MONTH _____ YEAR _____
 Estimated time to complete new well _____. (If longer than 1 year, attach explanation.)
13. Legal description of the land where the groundwater will be used:
 _____ 1/4 _____ 1/4 _____ 1/4 Section _____ Township _____ N/S Range _____ E/W. County _____
 10 Acre 40 Acre 160 Acre
14. Is the proposed well site within 100 feet of a septic tank system, sewage disposal area, landfill, hazardous waste facility or storage area of hazardous materials? ☐ Yes ☐ No (if yes, a request for a variance must accompany this application pursuant to R12-15-820.)
15. Driller's Name _____ DWR License No: _____ ROC License Category _____
 Mailing Address: _____
 Street City State Zip Telephone Number
16. **Attach a Well Construction Supplement, DWR form 55-90, and include a detailed construction diagram as indicated on the form.**

III. FOR SERVICE AREA WELLS AND IRRIGATION DISTRICT WELLS ONLY:

17. Is the proposed well located in your service area? ☐ Yes ☐ No
18. Will groundwater withdrawn be used in your service area? ☐ Yes ☐ No **(If answer is no, attach explanation.)**

IV. FOR REPLACEMENT WELL IN NEW LOCATION ONLY:

19. Registration number of original well 55- _____.
20. Location of the original well: _____ 1/4 _____ 1/4 _____ 1/4 Section _____ Township _____ N/S Range _____ E/W
 10 Acre 40 Acre 160 Acre
21. Distance between original well and proposed replacement well _____ feet.
22. When determining impacts under the Department's well spacing rules, the director will take into account the collective efforts of reducing or terminating withdrawals from the well being replaced combined with the proposed withdrawals from the replacement well if the applicant submits a hydrological study demonstrating those collective effects to the satisfaction of the director.
 Will a hydrological study be submitted? ☐ Yes ☐ No
23. Will the original well be abandoned if applicant receives a permit to drill a replacement well? ☐ Yes ☐ No.
(If yes, please submit a completed Notice of Intent to Abandon a Well along with this application.)
 If no, explain the planned use of the original well _____

V. FOR INCREASE IN PERMITTED MAXIMUM VOLUME FOR EXISTING WELL ONLY:

24. Registration number of the existing well 55- _____ Present pump design capacity _____ gallons per minute. Present permitted volume _____ acre-feet per year.
25. The new design pump capacity will be _____ gallons per minute. New permitted volume will be _____ acre-feet per year.
26. Will the well be modified or deepened? ☐ Yes ☐ No [Pursuant to R12-15-801(29)] **If yes, Attach a Well Construction Supplement, DWR form 55-90, and include a detailed construction diagram as indicated on the form.**
27. The existing well has previously been used in conjunction with or for the following: _____

It is understood that the permit, if granted, will be in accordance with the Groundwater Management Act (Title 45, Chapter 2), and the rules adopted thereunder. The permittee will be bound by the provisions of such law and the provisions of the permit issued.

I (we), _____ hereby affirm that all information provided in this application is true and correct to the best of my/our
 (print name) knowledge and belief.

Signature of Applicant _____ Date _____

Signature of Land Owner (if applicable) _____ Date _____